CHAPTER II

ANTICIPATED REACTIONS

PHYSICAL RESULTS:

A tremendous number of casualties will be produced in a very brief time. Man has long been familiar with the effects of blast and thermal radiation in many forms. Never before, however, has man faced weapons possessing the capability of instantaneously producing the effects of such magnitude as these. From the nominal 20 KT bomb, laceration from flying debris can be expected as far as 12,000 feet, burns as far as 14,000 feet, and radiation reactions up to 5,000 feet from ground zero. The nuclear bomb is similar to the high explosive bomb of World War II in that its main destructiveness is the result of blast or shock. In addition, much of the released energy is in the form of heat and light or "thermal radiation." On top of this, additional destruction occurs from radiation which is "residual" or "fall out."[3]

The blast will be equal to many "block busters." The shock wave from a nominal 20 KT Nuclear bomb may break windows for a distance of more than 10 miles, and completely destroy buildings up to one-third of a mile. The blast wave will displace materials such as trees, buildings, glass, rocks, and even people, and turn them into flying missiles. Flying debris will account for approximately two-thirds of the casualties.

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3. DA Pamphlet No. 30-1, Atomic Weapons Employment.,

THE CHAPLAIN AND PHYSICAL AND PSYCHOLOGICAL RESPONSES TO A NUCLEAR ATTACK

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Psalm 25:19 -- "Confidence in an unfaithful man in time of trouble is like a broken tooth, and a foot out of joint."

Psalm 56:3,4, -- "When I am afraid, I put my trust in Thee. In God whose word I praise, in God I trust without fear."

II Peter 3:10 -- "We know not the day nor the hour for death will come like a thief in the night."

Ezekiel 34:11-16 -- "As a shepherd seeketh out his flock in the day that he is among his sheep that are scattered; so will I seek out my sheep . . . I will feed them in good pasture . . . there they shall lie in a good fold . . . I will seek that which was lost, and bring again that which was driven away, and will bind up that which was broken, and will strengthen that which was sick."

THE CHAPLAIN AND PSYCHOLOGICAL AND PHYSICAL

RESPONSES TO A NUCLEAR ATTACK

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CHAPTER I

STATEMENT OF PURPOSE AND ANALYSIS OF PROBLEM

INTRODUCTION:

At 0530, 16 July, 1945, a blinding white light burst from a steel tower near the little trading post town of Alamogardo, New Mexico. The tower vaporized and the sand beneath it fused into glass. Thunder rolled and rumbled over mountains and mesas. A cloud, unlike any ever seen before--mushroom shaped and many-colored--boiled upward over seven miles high. The energy that lights the sun and the stars had been released on the planet earth. This was the first nuclear explosion--the dawn of the Nuclear Age. This device released energy millions of times more powerful than the energy of any other known explosion.

With the news release of this achievement, came an acute awareness of possible disaster, but this feeling soon faded from public concern. Today the realities of a Nuclear Attack do not enter the thinking of most Americans. There is a feeling of security behind "adequate stock piles of A-Bombs." There is an overwhelming disregard for the possibilities of Nuclear disaster as the result of wishful thinking and refusal to face reality. This complacency must be replaced with concern.

PURPOSE:

This study is an attempt to exploit some of the possible problems affecting the ministration of the Chaplain in relation to casualties in the Nuclear attack. Emphasis will be placed on problem areas resulting from psychological reactions. The American way of life is based on an awareness of the spiritual and moral values of the human being. Disaster brings these underlying factors into sharper focus. Therefore, the role of the Chaplain will take on increased importance in the Nuclear disaster.

INTEREST:

The interest of the writer is two-fold: (1) the experience of a Nuclear detonation in a slit trench located 2,000 yards from ground zero; and (2) current assignment with the STRAC One unit of the Army which is constantly field testing tactical aspects of Nuclear warfare.

PERTINANCE OF THE PROBLEM:

The use of Nuclear weapons will produce terror, deprivation, and disruption. Kissinger compares the Nuclear Age with the legend of Promethius who tried to steal the secret of fire from the gods -- "Our generation has succeeded in stealing the fire of the gods and it is doomed to live with its achievement."[1] Such times of crisis call for high caliber of leadership that will inspire the moral fibre of people. As a man of God, the Chaplain will be able to provide this leadership. His mission will call for challenging resourcefulness and hard work. His basic role will remain the same--to bring spiritual consolation to as many as possible.

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1. Henry A. Kissinger, Nuclear Weapons and Foreign Policy. (New York: Harper and Bros., 1957), p. 65.

IMPLICATIONS OF THE PROBLEM:

At 0815 hours, 6 August 1945, a Nuclear Weapon was detonated approximately 2,000 feet above Hiroshima, with a second incident at Nagasaki three days later. There were 70,000 people killed and 70,000 injured at Hiroshima from this single bomb. It is no toy!

One of the objectives of total war, when carried on with Nuclear weapons is to break the normal patterns of living of a people so that production falters, morale drops, indecision and dissension are created, and the will to persist in the war--even to survive--is broken. Troops on the battlefield will be attacked with the same objective. Normally in training it is possible to reinforce the individual's sense of security with respect to an anticipated danger by familiarizing him with protective measures. However, in reference to Nuclear warfare, there is little to offer the individual in the way of protective countermeasures. This fact in itself is of psychological importance.

ANALYSIS OF THE PROBLEM:

A single pound of U^{235} or Pu^{239} if completely fissioned would produce heat equal to that provided by 1,300 tons of coal. Pound for pound, atomic fuel releases 2,600,000 times more energy than coal.[2] One nominal 20 KT Nuclear bomb as dropped on Hiroshima, has the same explosive potential as a football field completely covered with one pound blocks of TNT piled seven feet high. The Hiroshima bomb was equal to 20,000 tons of TNT. Present bombs are figured in yields equal to millions of tons of TNT.

The types and number of physical casualties anticipated from such an explosion can be predicted with some degree of accuracy. The effects of psychological trauma accompanying such a destructive weapon, in producing mental breakdown or in otherwise influencing behavior, is not so susceptible to measurement or prediction. There has been little actual experience with behavior under the conditions of Nuclear disaster. However, much can be learned from reactions to other catastrophic trauma.

The memorable Orson Wells broadcast spurred active American studies of behavior response to disasters. These studies have been based on disasters which in size are insignificant in comparison with the devastation which Nuclear bombs can visit on mankind. From them, at best, deduction can produce only general principles about human behavior. Except for Hiroshima and Nagasaki, the human race has had no experience with the effects of a disaster as vast as a nuclear attack can bring. For this monograph, lessons have been drawn from the physical casualties and

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2. Ralph Ehapp, The New Force. (New York: Harper and Bros., 1953), p. 17.

psychological reactions to Combat, Aerial bombardment (Blitz in Britain), Civil disasters (Worchester Tornado, Holland Floods, and Texas City Fire), and the Hiroshima and Nagasaki bombings. From the total pattern of disaster behavior as exemplified by initial case materials, it is possible to discern several component factors.

In the event of a Nuclear attack, it would be impossible to separate those who have pure physical injuries from those who are suffering from psychological disturbances. Because of this fact, some consideration must be given to the fact that a soldier may be suffering from first degree burns and at the same time be subject to extreme isolation from reality.

Types of casualties resulting from blast are self-evident.[4]

Temperature at ground zero will approximate 4,000,000° Centigrade, and will decrease in practical effects at a radius of two and one-half miles. The intensity of heat and flash at the instant of detonation will be equal to that of the sun. As many as fifty per cent of the deaths will result from burns. After the Hiroshima bombing, Father Kleinsorge, a German Priest, heard a voice from some underbrush saying,

> "'Have you anything to drink?' When he had penetrated the bushes he saw there were about 20 men and they were all in a nightmarish state: their faces were burned, their eye-sockets were hollow, and the fluid from their melted eyes had run down their cheeks. Their mouths were swollen, pus-covered wounds, which they could not bear to stretch enough to admit the spout of a teapot."[5]

Fire and blast are familiar phenomena and they are apparent to the senses. On the other hand, radiation, another result of the Nuclear device, cannot be perceived through normal faculties. It has a great aura of mystery and terror, and can be detected only with the use of special instruments. Its basic symptoms include nausea and vomiting, temperature, malaise and fatigue, diarrhea, bleeding, convulsions, irrational behavior, and death. The first complaint is an upset stomach which is noticed within two hours after exposure, Ionization and radiation injury is like an unknown scourge. It inspires unending fear and is surrounded with an alarming mystery.

From such physical effects, one can imagine the types of injuries which will be sustained in the Nuclear attack.

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4. For additional references to physical response to various pressures, see DA Pamphlet No. 18-11, Handbook of Atomic Weapons for Medical Officers, p. 1.

5. John Hersey, Hiroshima. (New York: Alfred A. Knopf Co.), 1946, p. 218.

PSYCHOLOGICAL REACTIONS:

To raise one's head from the ground and find no recognizable feature--nothing but the dead and wounded and masses of smoking rubble, is conducive to abnormal psychological reaction. The results of such overwhelming emotional excitement and severe stress cannot be easily predicted. Among the injured and the less severly injured persons in the impact area will be found a phenomena conveniently labeled "the disaster syndrome." It may affect almost everyone in the area for a brief time. Col. Glass speaks of the mental processes involved as having three phases--perception, evaluation, and initiation of action. It will be easily perceived that something has gone wrong. The process of evaluation will be difficult because the information or perception will not be immediately recognizable as requiring some specific action. More extensive evaluation will be required in order to initiate proper action. The inability to know exactly what to do and how to do it, will prove to be a psychological barrier. From the study of specific disaster situations, it can be determined that reactions will include irritability, "stunned" responses, sadness, resentment, impulses to flee, over-concern with self-survival, fatigue, moderate euphoria, excitability, restlessness, and crying.[6]

It is estimated that in the Nuclear attack, 12 to 25 per cent of the troops will remain cool, collected, and capable of rational thought; 13 to 90 per cent will be "normally" bewildered; and 10 to 25 per cent may be psychologically incapable of taking appropriate action. People

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6. Studies of Holland Floods, Blitz Bombing, Britain and German reactions to Allied bombings, Worchester Tornado, Texas City Fire, Hiroshima and Nagasaki.

who have been exposed to traumatic events (bombardment, auto accident, flood, plane crash, earthquake) generally display varying degrees of delirious agitation or may suffer from gross sensory, motor, and mental inhibitions. Characteristic initial symptoms are jitteriness, sensitivity to noise, trembling, and terrifying nightmares in which the experience is relived.[7]

The most frequent psychological abnormality will be temporary emotional disruption. This will occur during or shortly after the disaster impact. These stunned victims will display mute behavior, uncontrollable or purposeless flight, apathetic depressed states, inappropriate activity and preoccupation with unreal emotional tensions. These reactions will usually be overcome within minutes or a few hours. Rarely will they remain for weeks. This is often a self-remedying situation, although recovery is assisted by the impact of a leader in whom there is confidence and trust.

Forty-seven per cent of the interviewed survivors of Hiroshima and Nagasaki indicated that they had experienced fear or terror. Fear occurs when a person sees or thinks he sees a situation which threatens his safety, or a status for which he has no able solution. When a person cannot cope with an eminent danger, the alerting forces within his nature produce mental sensations of distress or fear. Fear tends to cripple or interfere with the evaluatory functions of the mind. Even minor decisions become difficult to make; Speech is restricted; legs are rubbery and

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7. I. L. Janis, Air War and Emotional Stress. (New York: McGraw-Hill Book Co., 1951), p. 83.

weak; breathing becomes labored and difficult. Such fear is a potential source of further psychological casualty. In summary, fear reactions might be characterized as:

1. Feelings of apprehensiveness
2. Excited and disorganized actions during the period of danger
3. Persistent emotional upset after the danger has subsided
4. Imparement of post-danger adjustment by startle responses or by incapacitating anxiety symptoms
5. Reduced capacity for controlling emotional responses upon subsequent exposures to danger

Another characteristic pattern of behavior in response to an overwhelming catastrophy which destroys or massively alters the familiar surroundings of a person's life, is that of being "shocked," "stunned" or "apathetic." With the breakdown of evaluation componants, comes the inability to decide on appropriate actions to take. People will try to walk on broken legs, putter aimlessly around in the rubble, or do inappropriate things such as rescue a piece of paper while their own equipment is in ruin. Some psychologists refer to this state as "disaster fatigue." This person is tentatively no longer really in contact with his environment, and is not able to make decisions for himself. He is docile, suggestable, and responsive to simple directions. He is inexpressive and impassive. He will stand in the midst of utter chaos as though he were completely alone in the world. His gaze will be vacant. When spoken to, he may not reply. He is totally unable to help himself without guidance.

At Hiroshima people were seen naked and stumbling along unsteadily while trying to escape, weeping crazily and forgetting to be ashamed of their nakedness. This condition is similar to severe combat fatigue and rarely leads to permanent mental disturbances. There are feelings of utter helplessness evoked by tauntalizing impact of the violent physical concussion. And then, after emotional recovery begins to occur, "there comes the second emotional shock produced by the inescapable sight of mutilated human beings."[8]

Some men will explode into a flurry of activity. They will talk rapidly, joke inappropriately, make endless suggestions of little value, jump from job to job and seem to have unreal confidence in their abilities. They may speak of the multitude of innumerable tasks which need to be done to restore the effectiveness of the unit. Coupled with physical wounds, such as impared vision, hearing, mobility, this flurry might introduce a "conversion hysteria."

All available information consistently indicates that another dominant reaction will be acute anxiety.

Panic occurs when fear overpowers reason and individuals or groups attempt blind flight without thought of consequences. Like a Nuclear bomb, panic is fissionable--it can produce a chain reaction more deeply destructive than any explosive known. A few individuals in true panic can easily precipitate the headlong mass flight of a crowd. An outstanding characteristic of panic is blindness. Judgment disappears and is

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8. Janis, op. cit., p. 7.

replaced with an unreasoning attempt to flee. Many Hiroshima and Nagasaki survivors did run away from the city, "but in sparse accounts of themselves and of the people whom they saw, there are no references to excited, uncontrolled behavior that could be characterized as overt panic."[9] Therefore, it can be stated that panic probably will not result from a Nuclear attack. Decisions to escape the threatening danger by running to the rear cannot be termed panic, but rather "purposeful flight." There will be the natural inclination to run for "safety." Among the many references to this urge, is the testimony of a Hiroshima office worker who was well-accustomed to bombs, fires, etc. . . . "...(after recovery from the blast) I got up and ran to the mountains where the good shelter was. I just ran like the crazy. I stayed in the shelter for three days."[10]

Those who have been near the center of devastation, are categorized into the "near miss" group. They will have been hurt, will have seen horrors, will have terrible memories, low morale and personal disorganization. Their psychological reactions will be more acute and terrifying than those in the "remote miss" group.

Psychoses, prolonged depressions, and chronic neuroses are not appreciably increased by acute catastrophic situations. During the Blitz in England these reactions were anticipated but few occurred. Severe and persistent mental disorder did not result at Hiroshima or Nagasaki. Psychoses, as a rule, do not result from external threats, but rather from something on the "inside." The United States Army rate of three psychiatric

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9. Ibid., p. 38.

10. Ibid., p. 22.

patients per 1,000 does not appreciably change in war or peace.

In summary, it can be stated that persons who face threat have five basic courses of action which are open to them:

1. Aggression — in which the individual attempts to destroy the threatening force or element.
2. Manipulative activity — in which the action of the individual, while not specifically directed at the threatening agent, is nevertheless to a certain extent effective.
3. Immobility -- in which the individual assumes a state of stupefication or bewilderment.
4. Flight — in which the individual takes overt action to escape the danger.
5. Collapse -- in which the personality of the individual is so completely overwhelmed that he is no longer capable of any rational action.[11]

In general, it is felt that most people will behave in a socially responsible way and that their activities will generally consist of sensible attempts at coping with an unusually severe disaster situation. The key to mutual recovery may be found in the presence and suggestions of someone who holds the respect and admiration of the casualties. For this challenging responsibility the Chaplain is better qualified than anyone else who may be in the impact area.

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11. See "Man in the Nuclear Battlefield," by Col. H. S. Parker, MC.

CHAPTER III

THE ROLE OF THE CHAPLAIN

"In approximately 15 to 25 per cent of the persons who are subjected to an abrupt threat, prompt purposeful responses are evoked which continue into sustained effective action."[12] The Chaplain must be one of those 15 to 25 per cent. He should let his Commander know immediately of his whereabouts and condition and request that this information be forwarded to the Division Chaplain. The Chaplain may be in the disaster area or may enter as part of a disaster team. In either instance, his duties will be the same. In the Battle Group, it is suggested that one Chaplain (probably the Catholic) remain at the Aid Station, while the other Chaplain go immediately to the distress scene. The immediate prevention and rapid rehabilitation of casualties, physical and psychological, is a necessity. Every intact survivor will be needed to either continue the mission or aid in rescue operations. With this in mind, the Chaplain must encourage those who are able to continue with their military mission, since the opportune time for an enemy attack is immediately following a Nuclear strike. All available manpower and equipment must be assembled in anticipation of the expected assult, even though

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12. Military Medicine. Volume 118, No. 4, (April, 1956), p. 337.

men may feel a sense of guilt in not helping the wounded. The Chaplain must assure them that the survival of their wounded buddies may well depend on their continuance of the mission at hand.

Under the stress of a disaster condition, there exists a psychological climate different from that prevailing during normal conditions. In general, the behavior of persons under extreme stress is apt to be less efficient than usual, even in the performance of simple routine tasks. The common denominator of this deterioration of behavior is its regressive quality. There is often a reversion to previously learned and less complex ways of doing things. The nature and depth of this regression is variable, depending on the person's own constitution and history, and on the situation in which he is placed. In order to establish control, a strong and efficient central authority seems absolutely essential. This authority should be exercised by persons whose stature and judgment command respect and unquestioning obedience. General ingeniousness and critical ability are not guaranteed by higher education, but rather are specific to particular situations. Trained people under stress often react adversely. At Hiroshima, "an Army doctor was working, but the only medicine that he had was iodine, which he painted over cuts, bruises, strong burns, everything . . ."[13] If men trained to meet every day emergencies react like this, what will be the problems of the laymen?

Time has shown the benefit of leadership in the midst of distress. Those under stress need information and guidance. Here is a need for

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13. Hersey, op. cit., p. 31.

leaders who are conversant with human relations. Here the effective Chaplain will be irreplacable. The Chaplain is a tower of strength wherever he goes. In the Nuclear disaster, he will feel under pressure to function rapidly and effectively. He represents the oldest group institution in the world--the Church. People who do not go to church, still identify themselves with some particular denomination. Often when people have lost everything--homes, personal property, business, and even loved ones--they still desire spiritual in preference to physical care. The GI on the Nuclear battlefield will be no exception.

History is overladen with sagas of hopelessness in which the presence of a clergyman has turned defeat into victory, and despair into life. Sidney Stewart describes a Chaplain in the Phillipines who helped to bring order out of chaos.

> "Some of our officers had given up hope. Then I heard Father Cummin--'Listen to me, men'. The crying stopped and there was no more groaning. Then in his deep, clear, resonant voice he began to pray. It was the Lord's Prayer. It floated like a benediction through the hold, caressing every one of us."[14]

Hersey records the work of a Japanese pastor in Hiroshima.

> "In the park, Mr. Tanimoto organized the lightly wounded men of the neighborhood to cook. Altogether, the rice was enough to feed 100 people . . . the rescuing angel in this difficult situation was a Japanese Protestant Pastor. He brought a boat and offered to take the wounded upstream to a place where progress was easier . . . the boat returned about ½ hour later and the pastor requested that several help in the rescuing of 2 children whom he had seen in the river."[15]

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14. Sidney Stewart, Give Us This Day. New York: W. W. Norton Co., 1957, p. 199.

15. Hersey, op. cit., p. 44.

The immediate post-impact phase of disaster is crucial. Here effective action will save lives, diminish disability, reduce abnormal behavior, and generally cut down on the inevitable confusion. There will be no psychiatrists around. They will be busy being doctors--dressing wounds, setting legs, and treating burns. It is going to be up to the Chaplain to provide methods of treatment for the men in the field. The right things must be done at the right time and first things must be done first. A word of reassurance, some fluids by mouth, warmth, proper positioning, and careful movement, may well make the difference between living or dying. There will be little use in advising a man to "keep calm" when bricks, trees, and fortifications are falling all around. More practically under these circumstances, a man will want to know either "where is the nearest shelter" or how to play the old Army game of "let's get the _ _ _ _ out of here!" Psychological and emotional therapy is perhaps more difficult to provide than physical therapy because it involves intangible factors relating to values, individual emotional make up, and relationships between people. His theological background gives the Chaplain the prerequisite psychological insight into human nature.

Time does not permit a just consideration of opportunities for the Chaplain to serve in connection with physical casualties. Since survivors of a Nuclear attack cannot be segregated into purely physical and psychological disabilities, it is imperative that the Chaplain have a basic knowledge of first aid. Sorting, or triage, will remain the basic life saving principle in the handling of military casualties. Casualties will be classified and sorted in treatment priorities of Minimal, Immediate, Delayed,

and Expectant. The Chaplain must understand these categories and know what his respective ministrations should be to patients in each group. There will be a demand for medical treatment beyond the capabilities of the medics. For the first time in military history, persons needing immediate attention for survival, may be passed by in order to return those with minimum injuries to the front lines. There may be a conflict between the humanitarian and medico-military mission. This possibility alone places increased demands upon the Chaplain.[16]

The Chaplain will encounter men lost in a "daze"—either wandering aimlessly around, or sitting and staring out into space. These men may show no immediate response when spoken to. However, they will be forming at least vague opinions of the Chaplain as a person, and their later reactions will reflect the quality of this initial impression. A psychiatrist in Worchester went to the disaster area and later stated,

> "as I would encounter people who were not hurt, I would say 'Help me move some of these wounded people out.' and they couldn't. I would talk to them and explain what I had in mind, and they seemed to react and respond in a normal way, and then just stand there or wander away and nod their heads and not do anything."[17]

Psychiatrists agree that this syndrome seldom requires measures more intensive than reassurance and information. Nonverbal actions may be more effective than words in breaking through the communication barrier.

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16. The Chaplain serving with a tactical unit MUST keep abreast of latest First Aid field techniques. The importance of this demand cannot be overstressed in considering his mission in the atomic attack.

17. Anthony C. Wallace. Human Behavior—Extreme Situations. Disaster Study No. 1. (Washington: National Academy of Science, 1956), p. 17.

Another general characteristic that will be faced is that of fear. Some of the psychological responses to fear are increased heart beat and breathing, increased muscle tone, and the release of blood sugar. These factors are useful in sustaining the physical effort which may be required to cope with a danger. This activity can be channelled into useful acts in combating the danger (organized behavior) or into behavior which is not useful (disorganized behavior, panic, paralysis, senseless aggression). The important point is, that these people must be directed. Because of their disorganization and helplessness, they are highly docile and suggestible, and readily influenced by others in whom they have confidence. There is an inherent confidence which most men have in the Chaplain which will result in their acceptance of his advice. Action dissipates fear, but the action must be guided. Persons under distress conditions can be influenced. This is important because for the Chaplain, these people are waiting for suggestions, waiting for directions. They are ready to recover with the right guidance. A Priest describing the stunned people in Hiroshima said,

> "They failed to carry out any rescue work when something could have been saved by cooperative effort, and fatalistically let the catastrophie take its course . . . When we urged them to take part in rescue work, they did everything willingly, but on their own initiative they did very little."[18]

This carries two assertions: (1) Many survivors behaved in a distraught, purposeless manner; (2) Survivors failed to engage in essential

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18. Janis, op. cit., p. 28.

rescue work on their own initiative, BUT under suggestion reacted acceptably. Those who worked in rescue teams were better off themselves as far as psychological reactions, than those who "ran for the hills." When a person responds to the urging demands of a situation, tension is discharged. Inaction, on the other hand, causes a building up of fear and a further increase of inhibition. Military experience indicates that with the resumption of purposeful activity, fear is diminished and dissipated. People may suffer from acute anxiety and themselves be "scared stiff," but nevertheless can perform actions that are highly adaptive and efficient, if not impressively "heroic." This was true especially of the American troop reactions under fire in World War II. As a preestablished leader, the Chaplain's words of assurance and suggestion might make the difference between a platoon being caught sitting stupified in their holes, or found in place and ready to carry on the mission.

The Chaplain might come upon one man in a sector that has become aggressive in his reactions. The deft control of a single overly active man who seems bent on punishing the scapegoats he holds responsible for the disaster, can do more to avoid the horrible results or riots and panic than all the efforts of troops, medics, etc. who might have to quell a mob determined to vent their anger on some person or group.

Another important consideration open to the Chaplain is the maintainance of group contact. It is more difficult to have confidence in one's situation, to have confidence in one's group, or to derive strength from that group when one is no longer in visual or audio contact with its elements. The Chaplain can provide assurance to those isolated or separated

from their buddies, and restore the spiritual nature of confidence which is gained from identification with his military unit.

GENERAL PRINCIPLES:

In addition to specific responses described above, there are several general principles that should be considered by the Chaplain who may find himself working with men who have been hit by a Nuclear device:

EXERCISE PERSONAL INFLUENCE: The Chaplain's sense of composure and fearlessness, which religious faith alone can give, will help him restore faith and the will to live in those to whom he ministers. His presence and consoling words will quiet the nerves and restore confidence in those who are on the brink of hysteria. His attitudes and actions will influence disaster victims more than his words. Doubts about favorable outcome will soon be betrayed to the survivor by his many non-verbal cues which will indicate uncertainty, anxiety or guilt. He must believe that things will improve. He must throw the whole weight of his personality toward rational action. His calm, assured, expectant guidance will curb disorganized behavior.. He must remember that his objective is the welfare of all. Then he will not have time to be overly sympathetic with one person when the whole world seems to be falling apart. He must help every survivor without partiality. He must minister to all faiths--not to simulate or imitate their peculiar religious rites, but to give within the limits of spiritual comfort the assurance of God's presence in the hour of need. At the same time, he must be honest in appraising his own limitations.

SPEAK SIMPLY AND LISTEN UNDERSTANDINGLY: Perception and communication will be impared in victims of a Nuclear attack. The Chaplain must

speak clearly, slowly, and must repeat his instructions. The more simply things are done, the more effective they will be. He must talk with distressed survivors individually or in small groups. As they sense his constructive interest, their private worlds will no longer seem so desolate. Identity may be re-established in part by simple matters of registration--"Who are you?" "Where did you come from?" "What's your job?" Linking the person to his unit or team will serve to re-establish him with his past when he was secure (before the blast). Encourage them to talk about their experiences. This will facilitate the ventilation of emotional feelings. Letting people talk about what is going on within themselves, helps them to communicate; to establish their normal place in society; and to gain their emotional control. A positive orientation and awareness of surroundings is an important factor in helping to overcome the stress situation.

RECOGNIZE PHYSICAL RESTRICTIONS: Be able to use accepted first aid procedures. Remove the dead and dying away from the living to escape additional demoralizing effects. Do not administer sedatives to psychological casualties without the consent of a physician. Use the term "combat fatigue" instead of "radiation sickness." The latter carries mental connotations of uncertain medical recovery. Work with survivors where you find them. Moving them from the source of their psychological difficulty will worsen their situation. When operating in a radioactive contaminated area, work rapidly, and do not overextend the "stay time" which will be calculated to prevent overexposure. Do not use anything that might be contaminated in your administrations (water, cigaretts, communion

materials, etc.) Decontamination can be accomplished by washing with soap and water, brushing, scraping, ploughing, and removing outer clothing.

COUNTERACT ANXIETY WITH INFORMATION: Men will be anxious to know what has happened, the extent of the damage, personal dangers, and what is being done. The Chaplain must supply immediate and adequate information. Otherwise rumors will fly. Deliberate rumor-mongering by enemy agents can be expected. The spread of personalized and distorted accounts of the disaster must be checked. Clear, quick and accurate statements of the situation in which its important dangers are made clear but not exaggerated, are necessary. Immediate, understood, and feasible directions for coping with the imminant danger must be given. Men will ask anxiously about their parents, sweethearts, and children. The Chaplain must encourage them to "keep fighting" for the sake of their loved ones. In the same frame of reference, he must encourage those who feel guilty about continuing to fight rather than stopping and helping their wounded buddies. Following a Nuclear attack, victims will be concerned primarily with people and secondarily with things. Therefore, most efforts aimed at recovery must be pointed first toward the needs of people, and secondly toward the restoration of facilities.

ACCEPT SURVIVORS AS YOU FIND THEM: Accept every person's right to have his own feelings. Do not blame or ridicule him for feeling as he does. Help him cope with his feelings, but do not tell him how he "should" feel. Accept him limitations as real. Such goading remarks as, "It's all in your head," " Pull yourself together," and "Snap out of it" have no place on the Nuclear battlefield. Accept the handicap which they present

and help them discover quickly a few of their assets which they can use at once. By simply placing his hand on the shoulder of a skaking trooper, the Chaplain may be able to bring him back to normality.

ORGANIZE AND COORDINATE VOLUNTEERS: There will be a deluge of volunteers. Some will insist on their "right to give blood"; and some will insist on their right to help. In their eagerness to help they might actually hinder. Ambulance drivers may drive too fast in response to the pressure to "work quickly." The Chaplain must organize volunteer assistants and direct their activities for the accomplishment of good.

CHAPTER IV

SUMMARY AND CONCLUSION

In the event of a Nuclear attack, the Chaplain will be called upon to minister to survivors who are suffering from physical injuries as well as behavior disturbances. Basic principles of simple first aid must be known. Knowledge of anticipated types of psychological reactions and suggested response is imperative.

Information about the exact nature of hazards of blast, radiation, fire-storm, biological and chemical weapons, and all available specific information on the best protection, will constitute a potential store of personal knowledge which the Chaplain may use to organize his behavior in an emergency.

The Chaplain must examine his own behavior. Is he impulsive? Easily angered? Over-sensitive to criticism? Does he store up resentments instead of expressing them wisely? Does he judge people by their race, religion, or other groups? Is he prone to make promises beyond his ability because he can't say "no"? These traits may not have caused trouble in the past. However, in the midst of disaster, any one or all of them could trip him up badly.

The Chaplain's effectiveness after the Nuclear attack will depend largely on how effective he was prior to the attack. The importance of

the Chaplain's building of assurance, strength, and confidence among his troops prior to any emergency, cannot be over-exphasized. In fact, this is the key to the whole problem -- a Chaplain who is loved, honored, revered, trusted, and admired by his men. His zeal and energy will be sorely taxed, but his optimism will be a deciding asset. If he believes that his men can help themselves with God's help, and if he has the expectation that they are going to get better, then he is just what the medics order for aiding in psychological disaster. He must be prepared by religious and moral forces to exercise composure, self-discipline, self-assurance, and self-reliance.

The virtues inculcated by all religions will become indispensable to survival. The task is overwhelming. The Chaplain can only prepare himself and then pray that God will give strength, wisdom, and courage.

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